

1.1 ..... moves to amend H.F. No. 2037 as follows:

1.2 Delete everything after the enacting clause and insert:

1.3 "ARTICLE 1

1.4 COMMISSIONER OF DIRECT CARE AND TREATMENT

1.5 Section 1. Minnesota Statutes 2024, section 10.65, subdivision 2, is amended to read:

1.6 Subd. 2. **Definitions.** As used in this section, the following terms have the meanings  
1.7 given:

1.8 (1) "agency" means the Department of Administration; Department of Agriculture;  
1.9 Department of Children, Youth, and Families; Department of Commerce; Department of  
1.10 Corrections; Department of Direct Care and Treatment; Department of Education; Department  
1.11 of Employment and Economic Development; Department of Health; Office of Higher  
1.12 Education; Housing Finance Agency; Department of Human Rights; Department of Human  
1.13 Services; Department of Information Technology Services; Department of Iron Range  
1.14 Resources and Rehabilitation; Department of Labor and Industry; Minnesota Management  
1.15 and Budget; Bureau of Mediation Services; Department of Military Affairs; Metropolitan  
1.16 Council; Department of Natural Resources; Pollution Control Agency; Department of Public  
1.17 Safety; Department of Revenue; Department of Transportation; Department of Veterans  
1.18 Affairs; ~~Direct Care and Treatment~~; Gambling Control Board; Racing Commission; the  
1.19 Minnesota Lottery; the Animal Health Board; the Public Utilities Commission; and the  
1.20 Board of Water and Soil Resources;

1.21 (2) "consultation" means the direct and interactive involvement of the Minnesota Tribal  
1.22 governments in the development of policy on matters that have Tribal implications.  
1.23 Consultation is the proactive, affirmative process of identifying and seeking input from  
1.24 appropriate Tribal governments and considering their interest as a necessary and integral

2.1 part of the decision-making process. This definition adds to statutorily mandated notification  
2.2 procedures. During a consultation, the burden is on the agency to show that it has made a  
2.3 good faith effort to elicit feedback. Consultation is a formal engagement between agency  
2.4 officials and the governing body or bodies of an individual Minnesota Tribal government  
2.5 that the agency or an individual Tribal government may initiate. Formal meetings or  
2.6 communication between top agency officials and the governing body of a Minnesota Tribal  
2.7 government is a necessary element of consultation;

2.8 (3) "matters that have Tribal implications" means rules, legislative proposals, policy  
2.9 statements, or other actions that have substantial direct effects on one or more Minnesota  
2.10 Tribal governments, or on the distribution of power and responsibilities between the state  
2.11 and Minnesota Tribal governments;

2.12 (4) "Minnesota Tribal governments" means the federally recognized Indian Tribes located  
2.13 in Minnesota including: Bois Forte Band; Fond Du Lac Band; Grand Portage Band; Leech  
2.14 Lake Band; Mille Lacs Band; White Earth Band; Red Lake Nation; Lower Sioux Indian  
2.15 Community; Prairie Island Indian Community; Shakopee Mdewakanton Sioux Community;  
2.16 and Upper Sioux Community; and

2.17 (5) "timely and meaningful" means done or occurring at a favorable or useful time that  
2.18 allows the result of consultation to be included in the agency's decision-making process for  
2.19 a matter that has Tribal implications.

2.20 Sec. 2. Minnesota Statutes 2024, section 15.01, is amended to read:

2.21 **15.01 DEPARTMENTS OF THE STATE.**

2.22 The following agencies are designated as the departments of the state government: the  
2.23 Department of Administration; the Department of Agriculture; the Department of Children,  
2.24 Youth, and Families; the Department of Commerce; the Department of Corrections; the  
2.25 Department of Direct Care and Treatment; the Department of Education; the Department  
2.26 of Employment and Economic Development; the Department of Health; the Department of  
2.27 Human Rights; the Department of Human Services; the Department of Information  
2.28 Technology Services; the Department of Iron Range Resources and Rehabilitation; the  
2.29 Department of Labor and Industry; the Department of Management and Budget; the  
2.30 Department of Military Affairs; the Department of Natural Resources; the Department of  
2.31 Public Safety; the Department of Revenue; the Department of Transportation; the Department  
2.32 of Veterans Affairs; and their successor departments.

3.1 Sec. 3. Minnesota Statutes 2024, section 15.06, subdivision 1, is amended to read:

3.2 Subdivision 1. **Applicability.** This section applies to the following departments or  
3.3 agencies: the Departments of Administration; Agriculture; Children, Youth, and Families;  
3.4 Commerce; Corrections; Direct Care and Treatment; Education; Employment and Economic  
3.5 Development; Health; Human Rights; Human Services; Iron Range Resources and  
3.6 Rehabilitation; Labor and Industry; Management and Budget; Natural Resources; Public  
3.7 Safety; Revenue; Transportation; and Veterans Affairs; the Housing Finance and Pollution  
3.8 Control Agencies; the Department of Information Technology Services; the Bureau of  
3.9 Mediation Services; and their successor departments and agencies. The heads of the foregoing  
3.10 departments or agencies are "commissioners."

3.11 Sec. 4. Minnesota Statutes 2024, section 43A.241, is amended to read:

3.12 **43A.241 INSURANCE CONTRIBUTIONS; FORMER EMPLOYEES.**

3.13 (a) This section applies to a person who:

3.14 (1) was employed by the commissioner of corrections, the commissioner of human  
3.15 services, or the commissioner of direct care and treatment ~~executive board~~;

3.16 (2) was covered by the correctional employee retirement plan under section 352.91 or  
3.17 the general state employees retirement plan of the Minnesota State Retirement System as  
3.18 defined in section 352.021;

3.19 (3) while employed under clause (1), was assaulted by:

3.20 (i) a person under correctional supervision for a criminal offense; or

3.21 (ii) a client or patient at the Minnesota Sex Offender Program, or at a state-operated  
3.22 forensic services program as defined in section 352.91, subdivision 3j; and

3.23 (4) as a direct result of the assault under clause (3), was determined to be totally and  
3.24 permanently physically disabled under laws governing the Minnesota State Retirement  
3.25 System.

3.26 (b) For a person to whom this section (b) applies, the commissioner of corrections, the  
3.27 commissioner of human services, or the commissioner of direct care and treatment ~~executive~~  
3.28 ~~board~~, using existing budget resources, must continue to make the employer contribution  
3.29 for medical and dental benefits under the State Employee Group Insurance Program after  
3.30 the person terminates state service. If the person had dependent coverage at the time of  
3.31 terminating state service, employer contributions for dependent coverage also must continue  
3.32 under this section. The employer contributions must be in the amount of the employer

4.1 contribution for active state employees at the time each payment is made. The employer  
4.2 contributions must continue until the person reaches age 65, provided the person makes the  
4.3 required employee contributions, in the amount required of an active state employee, at the  
4.4 time and in the manner specified by the commissioner ~~or executive board~~.

4.5 Sec. 5. Minnesota Statutes 2024, section 246C.01, is amended to read:

4.6 **246C.01 TITLE.**

4.7 This chapter may be cited as the "Department of Direct Care and Treatment Act."

4.8 Sec. 6. Minnesota Statutes 2024, section 246C.015, subdivision 3, is amended to read:

4.9 Subd. 3. **Commissioner.** "Commissioner" means the commissioner of ~~human services~~  
4.10 direct care and treatment.

4.11 Sec. 7. Minnesota Statutes 2024, section 246C.015, is amended by adding a subdivision  
4.12 to read:

4.13 Subd. 5b. **Department.** "Department" means the Department of Direct Care and  
4.14 Treatment.

4.15 Sec. 8. Minnesota Statutes 2024, section 246C.02, subdivision 1, is amended to read:

4.16 Subdivision 1. **Establishment.** The Department of Direct Care and Treatment is ~~created~~  
4.17 as an agency headed by an executive board established.

4.18 Sec. 9. Minnesota Statutes 2024, section 246C.04, subdivision 2, is amended to read:

4.19 Subd. 2. **Transfer of custody of civilly committed persons.** The commissioner of  
4.20 human services shall continue to exercise all authority and responsibility for and retain  
4.21 custody of persons subject to civil commitment under chapter 253B or 253D until July 1,  
4.22 2025. Effective July 1, 2025, custody of persons subject to civil commitment under chapter  
4.23 253B or 253D and in the custody of the commissioner of human services as of that date is  
4.24 hereby transferred to the ~~executive board~~ commissioner without any further act or proceeding.  
4.25 Authority and responsibility for the commitment of such persons is transferred to the  
4.26 ~~executive board~~ commissioner July 1, 2025.

4.27 Sec. 10. Minnesota Statutes 2024, section 246C.04, subdivision 3, is amended to read:

4.28 Subd. 3. **Control of direct care and treatment.** The commissioner of human services  
4.29 shall continue to exercise all authorities and responsibilities under this chapter and chapters

5.1 13, 245, 246, 246B, 252, 253, 253B, 253C, 253D, 254A, 254B, and 256, with reference to  
5.2 any state-operated service, program, or facility subject to transfer under Laws 2024, chapter  
5.3 79; Laws 2024, chapter 125, article 5; and Laws 2024, chapter 127, article 50, until July 1,  
5.4 2025. Effective July 1, 2025, the powers and duties vested in or imposed upon the  
5.5 commissioner of human services with reference to any state-operated service, program, or  
5.6 facility are hereby transferred to, vested in, and imposed upon the ~~executive board~~  
5.7 commissioner according to this chapter and applicable state law. Effective July 1, 2025, the  
5.8 ~~executive board~~ commissioner has the exclusive power of administration and management  
5.9 of all state hospitals for persons with a developmental disability, mental illness, or substance  
5.10 use disorder. Effective July 1, 2025, the ~~executive board~~ commissioner has the power and  
5.11 authority to determine all matters relating to the development of all of the foregoing  
5.12 institutions and of such other institutions vested in the ~~executive board~~ commissioner.  
5.13 Effective July 1, 2025, the powers, functions, and authority vested in the commissioner of  
5.14 human services relative to such state institutions are transferred to the ~~executive board~~  
5.15 commissioner according to this chapter and applicable state law.

5.16 Sec. 11. Minnesota Statutes 2024, section 246C.07, subdivision 1, is amended to read:

5.17 Subdivision 1. **Generally.** (a) The ~~executive board~~ commissioner must operate the  
5.18 ~~agency department~~ according to this chapter and applicable state and federal law. The overall  
5.19 management and control of the ~~agency department~~ is vested in the ~~executive board~~  
5.20 commissioner in accordance with this chapter.

5.21 (b) The ~~executive board~~ commissioner must appoint a chief executive officer according  
5.22 to section 246C.08. The chief executive officer is responsible for the administrative and  
5.23 operational duties of the Department of Direct Care and Treatment in accordance with this  
5.24 chapter and serves as the deputy commissioner for the purposes of section 15.06 and as  
5.25 deputy agency head for the purposes of section 43A.08.

5.26 (c) The ~~executive board~~ commissioner may delegate duties imposed by this chapter and  
5.27 under applicable state and federal law as deemed appropriate by the ~~board~~ commissioner  
5.28 and in accordance with this chapter. Any delegation of a specified statutory duty or power  
5.29 to an employee of the Department of Direct Care and Treatment other than the chief executive  
5.30 officer must be made by written order and filed with the secretary of state. Only the chief  
5.31 executive officer shall have the powers and duties of the ~~executive board~~ commissioner as  
5.32 specified in section 246C.08.

6.1 Sec. 12. Minnesota Statutes 2024, section 246C.07, subdivision 2, is amended to read:

6.2 Subd. 2. **Principles.** The ~~executive board~~ commissioner, in undertaking ~~its~~ the  
6.3 commissioner's duties and responsibilities and within the Department of Direct Care and  
6.4 Treatment resources, shall act according to the following principles:

6.5 (1) prevent the waste or unnecessary spending of public money;

6.6 (2) use innovative fiscal and human resource practices to manage the state's resources  
6.7 and operate the ~~agency~~ department as efficiently as possible;

6.8 (3) coordinate Department of Direct Care and Treatment activities wherever appropriate  
6.9 with the activities of other governmental agencies;

6.10 (4) use technology where appropriate to increase ~~agency~~ department productivity, improve  
6.11 customer service, increase public access to information about government, and increase  
6.12 public participation in the business of government; and

6.13 (5) utilize constructive and cooperative labor management practices to the extent  
6.14 otherwise required by chapter 43A or 179A.

6.15 Sec. 13. Minnesota Statutes 2024, section 246C.07, subdivision 8, is amended to read:

6.16 Subd. 8. **Biennial estimates; suggestions for legislation.** The ~~executive board~~  
6.17 commissioner shall prepare, for the use of the legislature, biennial estimates of appropriations  
6.18 necessary or expedient to be made for the support of the institutions and for extraordinary  
6.19 and special expenditures for buildings and other improvements. The ~~executive board~~  
6.20 commissioner shall make suggestions relative to legislation for the benefit of the institutions.  
6.21 The ~~executive board~~ commissioner shall report the estimates and suggestions to the legislature  
6.22 on or before November 15 in each even-numbered year. ~~A designee of the executive board~~  
6.23 The commissioner on request shall appear before any legislative committee and furnish any  
6.24 required information in regard to the condition of any such institution.

6.25 Sec. 14. **[246C.075] ADVISORY COUNCIL ON DIRECT CARE AND TREATMENT.**

6.26 Subdivision 1. Establishment. An Advisory Council on Direct Care and Treatment is  
6.27 established.

6.28 Subd. 2. Membership. (a) The Advisory Council on Direct Care and Treatment must  
6.29 consist of no more than 15 members appointed as provided in section 15.0597. The advisory  
6.30 council must include:

- 7.1 (1) one member who is a licensed physician with experience serving behavioral health  
7.2 patients or a licensed psychiatrist, appointed by the commissioner;
- 7.3 (2) two members with executive management experience at a hospital or health care  
7.4 system, or experience serving on the board of a hospital or health care system, appointed  
7.5 by the commissioner;
- 7.6 (3) three members, each appointed by the commissioner, who have experience working:
- 7.7 (i) in the delivery of behavioral health services;
- 7.8 (ii) in care coordination;
- 7.9 (iii) in traditional healing practices;
- 7.10 (iv) as a licensed health care professional;
- 7.11 (v) within health care administration; or
- 7.12 (vi) with residential services;
- 7.13 (4) one member appointed by the Association of Counties;
- 7.14 (5) one member who has an active role as a union representative representing staff at  
7.15 the Department of Direct Care and Treatment appointed by joint representatives of the  
7.16 following unions: American Federation of State, County, and Municipal Employees  
7.17 (AFSCME); Minnesota Association of Professional Employees (MAPE); Minnesota Nurses  
7.18 Association (MNA); Middle Management Association (MMA); and State Residential  
7.19 Schools Education Association (SRSEA);
- 7.20 (6) one member appointed by the National Alliance on Mental Illness Minnesota;
- 7.21 (7) two members representing people with lived experience being served by state-operated  
7.22 treatment programs or their families, appointed by the commissioner;
- 7.23 (8) one member appointed by the Minnesota Disability Law Center; and
- 7.24 (9) up to three additional members appointed by the commissioner reflecting community  
7.25 interests or perspectives the commissioner deems valuable.
- 7.26 (b) Membership on the advisory council must include representation from outside the  
7.27 seven-county metropolitan area, as defined in section 473.121, subdivision 2.
- 7.28 (c) Appointing authorities under paragraph (a) must make initial appointments by  
7.29 September 1, 2025.

8.1 Subd. 3. **Terms; compensation; removal; vacancies; expiration.** (a) The membership  
8.2 terms, compensation, removal of members, and filling of vacancies of members are as  
8.3 provided in section 15.059, except that council members shall not receive a per diem.

8.4 (b) The advisory council does not expire.

8.5 Subd. 4. **Meetings.** (a) The members of the advisory council shall elect a chair from  
8.6 among their membership at the first meeting and annually thereafter or upon a vacancy in  
8.7 the chair. The advisory council shall meet at the call of the commissioner, the call of the  
8.8 chair, or upon the call of a majority of members.

8.9 (b) The first meeting of the advisory council must be held no later than September 15,  
8.10 2025.

8.11 Subd. 5. **Duties.** The advisory council shall advise the commissioner regarding the  
8.12 operations of the Department of Direct Care and Treatment, the clinical standards of care  
8.13 for patients and clients of state-operated programs, and provide recommendations to the  
8.14 commissioner for improving the department's role in the state's mental health care system.

8.15 Sec. 15. Minnesota Statutes 2024, section 246C.08, is amended to read:

8.16 **246C.08 CHIEF EXECUTIVE OFFICER; SERVICE; DUTIES.**

8.17 Subdivision 1. **Service.** (a) The direct care and treatment chief executive officer is  
8.18 appointed by the ~~executive board, in consultation with the governor, and serves at the~~  
8.19 ~~pleasure of the executive board, with the advice and consent of the senate~~ commissioner,  
8.20 and is the deputy commissioner for the purposes of section 15.06.

8.21 (b) The chief executive officer shall serve in the unclassified service in accordance with  
8.22 section 43A.08. The Compensation Council under section 15A.082 shall establish the salary  
8.23 of the chief executive officer.

8.24 Subd. 2. **Powers and duties.** (a) The chief executive officer's primary duty is to assist  
8.25 the ~~executive board~~ commissioner. The chief executive officer is responsible for the  
8.26 administrative and operational management of the agency.

8.27 ~~(b) The chief executive officer shall have all the powers of the executive board unless~~  
8.28 ~~the executive board directs otherwise. The chief executive officer shall have the authority~~  
8.29 ~~to speak for the executive board and Direct Care and Treatment within and outside the~~  
8.30 ~~agency.~~

8.31 ~~(e)~~ (b) In the event that a vacancy occurs for any reason within the chief executive officer  
8.32 position, the executive medical director appointed under section 246C.09 shall immediately



9.1 become the temporary chief executive officer until the ~~executive board~~ commissioner  
9.2 appoints a new chief executive officer. During this period, the executive medical director  
9.3 shall have all the powers and authority delegated to the chief executive officer by the ~~board~~  
9.4 commissioner and specified in this chapter.

9.5 Subd. 3. **Minimum qualifications.** The chief executive officer must be selected by the  
9.6 commissioner without regard to political affiliation and must have wide and successful  
9.7 administrative experience in and understanding of health care, preferably behavioral health  
9.8 care, including clinical and operational needs of a large health care service and delivery  
9.9 organization.

9.10 Sec. 16. Minnesota Statutes 2024, section 246C.09, subdivision 3, is amended to read:

9.11 Subd. 3. **Duties.** The executive medical director shall:

9.12 (1) oversee the clinical provision of inpatient mental health services provided in the  
9.13 state's regional treatment centers;

9.14 (2) recruit and retain psychiatrists to serve on the ~~Direct Care and Treatment~~ department  
9.15 medical staff established in subdivision 4;

9.16 (3) consult with the ~~executive board, the chief executive officer,~~ commissioner, the chief  
9.17 executive officer, and community mental health center directors to develop standards for  
9.18 treatment and care of patients in state-operated service programs;

9.19 (4) develop and oversee a continuing education program for members of the medical  
9.20 staff; and

9.21 (5) participate and cooperate in the development and maintenance of a quality assurance  
9.22 program for state-operated services that assures that residents receive continuous quality  
9.23 inpatient, outpatient, and postdischarge care.

9.24 Sec. 17. Minnesota Statutes 2024, section 246C.091, subdivision 2, is amended to read:

9.25 Subd. 2. **Facilities management account.** A facilities management account is created  
9.26 in the special revenue fund of the state treasury. Beginning July 1, 2025, money in the  
9.27 account is appropriated to the commissioner of direct care and treatment ~~executive board~~  
9.28 and may be used to maintain buildings, acquire facilities, renovate existing buildings, or  
9.29 acquire land for the design and construction of buildings for ~~Direct Care and Treatment~~  
9.30 department use. Money received for maintaining state property under control of the ~~executive~~  
9.31 ~~board~~ commissioner may be deposited into this account.

10.1 Sec. 18. Minnesota Statutes 2024, section 246C.091, subdivision 3, is amended to read:

10.2 Subd. 3. **Direct care and treatment systems account.** (a) The direct care and treatment  
10.3 systems account is created in the special revenue fund of the state treasury. Beginning July  
10.4 1, 2025, money in the account is appropriated to the commissioner of direct care and  
10.5 treatment ~~executive board~~ and may be used for security systems and information technology  
10.6 projects, services, and support under the control of the ~~executive board~~ commissioner.

10.7 (b) The commissioner of human services shall transfer all money allocated to the direct  
10.8 care and treatment systems projects under section 256.014 to the direct care and treatment  
10.9 systems account under this section by June 30, 2026.

10.10 Sec. 19. Minnesota Statutes 2024, section 246C.091, subdivision 4, is amended to read:

10.11 Subd. 4. **Cemetery maintenance account.** The cemetery maintenance account is created  
10.12 in the special revenue fund of the state treasury. Money in the account is appropriated to  
10.13 the ~~executive board~~ commissioner of direct care and treatment for the maintenance of  
10.14 cemeteries under control of the ~~executive board~~ commissioner. Money allocated to ~~Direct~~  
10.15 ~~Care and Treatment~~ department cemeteries may be transferred to this account.

10.16 Sec. 20. Laws 2024, chapter 127, article 50, section 41, subdivision 2, is amended to read:

10.17 Subd. 2. **Chief executive officer.** (a) The commissioner of direct care and treatment  
10.18 ~~executive board~~ must appoint as the initial chief executive officer for direct care and treatment  
10.19 under Minnesota Statutes, section ~~246C.07~~ 246C.08, the chief executive officer of the direct  
10.20 care and treatment division of the Department of Human Services holding that position at  
10.21 the time the initial appointment is made by the ~~board~~ commissioner. The initial appointment  
10.22 of the chief executive officer must be made by the ~~executive board~~ commissioner by July  
10.23 1, 2025. ~~The initial appointment of the chief executive officer is subject to confirmation by~~  
10.24 ~~the senate.~~

10.25 (b) In its report issued April 1, 2025, the Compensation Council under Minnesota Statutes,  
10.26 section 15A.082, must establish the salary of the chief executive officer at an amount equal  
10.27 to or greater than the amount paid to the chief executive officer of the direct care and  
10.28 treatment division of the Department of Human Services as of the date of initial appointment.  
10.29 The salary of the chief executive officer shall become effective July 1, 2025, pursuant to  
10.30 Minnesota Statutes, section 15A.082, subdivision 3. Notwithstanding Minnesota Statutes,  
10.31 sections 15A.082 and 246C.08, subdivision 1, if the initial appointment of the chief executive  
10.32 officer occurs prior to the effective date of the salary specified by the Compensation Council  
10.33 in its April 1, 2025, report, the salary of the chief executive officer must equal the amount

11.1 paid to the chief executive officer of the direct care and treatment division of the Department  
11.2 of Human Services as of the date of initial appointment.

11.3 **Sec. 21. INITIAL APPOINTMENT OF COMMISSIONER OF DIRECT CARE**  
11.4 **AND TREATMENT.**

11.5 The initial appointment of a commissioner of direct care and treatment or initial  
11.6 designation of a temporary commissioner of direct care and treatment by the governor under  
11.7 Minnesota Statutes, section 15.06, must be made by July 1, 2025. Notwithstanding Minnesota  
11.8 Statutes, section 15.066, subdivision 2, clause (4), the initial appointment of a commissioner  
11.9 of direct care and treatment or initial designation of a temporary commissioner of direct  
11.10 care and treatment is effective no earlier than July 1, 2025.

11.11 **Sec. 22. SALARY FOR THE COMMISSIONER OF THE DEPARTMENT OF**  
11.12 **DIRECT CARE AND TREATMENT.**

11.13 If the initial appointment of the commissioner of the Department of Direct Care and  
11.14 Treatment occurs prior to the commissioner's salary being determined by the Compensation  
11.15 Council under Minnesota Statutes, section 15A.082, the commissioner's salary must equal  
11.16 the salary of the chief executive officer of direct care and treatment, as determined under  
11.17 Minnesota Statutes, section 15A.0815, subdivision 2.

11.18 **EFFECTIVE DATE.** This section is effective the day following final enactment and  
11.19 expires upon adoption by the Compensation Council of a salary for the position of  
11.20 commissioner of the Department of Direct Care and Treatment.

11.21 **Sec. 23. DISSOLUTION OF THE DIRECT CARE AND TREATMENT EXECUTIVE**  
11.22 **BOARD.**

11.23 Subdivision 1. **Dissolution of executive board.** Upon the effective date of this section,  
11.24 the direct care and treatment executive board under Minnesota Statutes, section 246C.06,  
11.25 is dissolved.

11.26 Subd. 2. **Transfer of duties.** (a) Any authorities and responsibilities that were vested  
11.27 in the executive board prior to July 1, 2025, are transferred to the commissioner of human  
11.28 services. Minnesota Statutes, section 15.039, applies to the transfer of responsibilities from  
11.29 the direct care and treatment executive board to the commissioner of human services between  
11.30 the effective date of this section and July 1, 2025.

12.1 (b) Minnesota Statutes, section 246C.04, governs the transfer of authority and  
12.2 responsibility on July 1, 2025, from the commissioner of human services to the commissioner  
12.3 of direct care and treatment.

12.4 Sec. 24. **REVISOR INSTRUCTION.**

12.5 (a) The revisor of statutes shall change the term "Direct Care and Treatment" to "the  
12.6 Department of Direct Care and Treatment" and "agency" to "department" wherever the  
12.7 terms appear in respect to the governmental entity with programmatic direction and fiscal  
12.8 control over state-operated services, programs, or facilities under Minnesota Statutes, chapter  
12.9 246C. The revisor may make technical and other necessary changes to sentence structure  
12.10 to preserve the meaning of the text.

12.11 (b) The revisor of statutes shall change the term "executive board" to "commissioner"  
12.12 and "Direct Care and Treatment executive board" to "commissioner of direct care and  
12.13 treatment" wherever the terms appear in respect to the head of the governmental entity with  
12.14 programmatic direction and fiscal control over state-operated services, programs, or facilities  
12.15 under Minnesota Statutes, chapter 246C. The revisor may make technical and other necessary  
12.16 changes to sentence structure to preserve the meaning of the text.

12.17 Sec. 25. **REVISOR INSTRUCTION.**

12.18 The revisor of statutes, in consultation with the House Research Department; the Office  
12.19 of Senate Counsel, Research and Fiscal Analysis; the Department of Human Services; and  
12.20 the Department of Direct Care and Treatment, shall make necessary cross-reference changes  
12.21 to conform with this act. The revisor may make technical and other necessary changes to  
12.22 sentence structure to preserve the meaning of the text. The revisor may alter the coding in  
12.23 this act to incorporate statutory changes made by other law in the 2025 regular legislative  
12.24 session.

12.25 Sec. 26. **REVISOR INSTRUCTION.**

12.26 The revisor of statutes shall renumber Minnesota Statutes, section 246C.06, subdivision  
12.27 11, as Minnesota Statutes, section 246C.07, subdivision 4a, and correct all cross-references.

12.28 Sec. 27. **REPEALER.**

12.29 (a) Minnesota Statutes 2024, sections 246C.015, subdivisions 5a and 6; 246C.06,  
12.30 subdivisions 1, 2, 3, 4, 5, 6, 7, 8, 9, and 10; and 246C.07, subdivisions 4 and 5, are repealed.

12.31 (b) Laws 2024, chapter 79, article 1, section 20, is repealed.

13.1 (c) Laws 2024, chapter 125, article 5, sections 40; and 41; and Laws 2024, chapter 127,  
 13.2 article 50, sections 40; and 41, subdivisions 1, and 3, are repealed retroactive to July 1,  
 13.3 2024.

13.4 Sec. 28. **EFFECTIVE DATE.**

13.5 This article is effective the day following final enactment.

13.6 **ARTICLE 2**  
 13.7 **CONFORMING CHANGES**

13.8 Section 1. Minnesota Statutes 2024, section 15A.0815, subdivision 2, is amended to read:

13.9 Subd. 2. **Agency head salaries.** The salary for a position listed in this subdivision shall  
 13.10 be determined by the Compensation Council under section 15A.082. The commissioner of  
 13.11 management and budget must publish the salaries on the department's website. This  
 13.12 subdivision applies to the following positions:

13.13 Commissioner of administration;

13.14 Commissioner of agriculture;

13.15 Commissioner of education;

13.16 Commissioner of children, youth, and families;

13.17 Commissioner of commerce;

13.18 Commissioner of corrections;

13.19 Commissioner of health;

13.20 Commissioner, Minnesota Office of Higher Education;

13.21 Commissioner, Minnesota IT Services;

13.22 Commissioner, Housing Finance Agency;

13.23 Commissioner of human rights;

13.24 Commissioner of human services;

13.25 Commissioner of labor and industry;

13.26 Commissioner of management and budget;

13.27 Commissioner of natural resources;

13.28 Commissioner, Pollution Control Agency;

- 14.1 Commissioner of public safety;
- 14.2 Commissioner of revenue;
- 14.3 Commissioner of employment and economic development;
- 14.4 Commissioner of transportation;
- 14.5 Commissioner of veterans affairs;
- 14.6 Commissioner of direct care and treatment;
- 14.7 Executive director of the Gambling Control Board;
- 14.8 Executive director of the Minnesota State Lottery;
- 14.9 Executive director of the Office of Cannabis Management;
- 14.10 Commissioner of Iron Range resources and rehabilitation;
- 14.11 Commissioner, Bureau of Mediation Services;
- 14.12 Ombudsman for mental health and developmental disabilities;
- 14.13 Ombudsperson for corrections;
- 14.14 Chair, Metropolitan Council;
- 14.15 Chair, Metropolitan Airports Commission;
- 14.16 School trust lands director;
- 14.17 Executive director of pari-mutuel racing;
- 14.18 Commissioner, Public Utilities Commission;
- 14.19 ~~Chief Executive Officer, Direct Care and Treatment;~~ and
- 14.20 Director of the Office of Emergency Medical Services.

14.21 Sec. 2. Minnesota Statutes 2024, section 15A.082, subdivision 1, is amended to read:

- 14.22 Subdivision 1. **Creation.** A Compensation Council is created each odd-numbered year
- 14.23 to establish the compensation of constitutional officers and the heads of state and metropolitan
- 14.24 agencies identified in section 15A.0815; and to assist the legislature in establishing the
- 14.25 compensation of justices of the supreme court and judges of the court of appeals and district
- 14.26 court, ~~and to determine the daily compensation for voting members of the Direct Care and~~
- 14.27 ~~Treatment executive board.~~

15.1 Sec. 3. Minnesota Statutes 2024, section 15A.082, subdivision 3, is amended to read:

15.2 Subd. 3. **Submission of recommendations and determination.** (a) By April 1 in each  
15.3 odd-numbered year, the Compensation Council shall submit to the speaker of the house and  
15.4 the president of the senate salary recommendations for justices of the supreme court, and  
15.5 judges of the court of appeals and district court. The recommended salaries take effect on  
15.6 July 1 of that year and July 1 of the subsequent even-numbered year and at whatever interval  
15.7 the council recommends thereafter, unless the legislature by law provides otherwise. The  
15.8 salary recommendations take effect if an appropriation of money to pay the recommended  
15.9 salaries is enacted after the recommendations are submitted and before their effective date.  
15.10 Recommendations may be expressly modified or rejected.

15.11 (b) By April 1 in each odd-numbered year, the Compensation Council must prescribe  
15.12 salaries for constitutional officers, and for the agency and metropolitan agency heads  
15.13 identified in section 15A.0815. The prescribed salary for each office must take effect July  
15.14 1 of that year and July 1 of the subsequent even-numbered year and at whatever interval  
15.15 the council determines thereafter, unless the legislature by law provides otherwise. An  
15.16 appropriation by the legislature to fund the relevant office, branch, or agency of an amount  
15.17 sufficient to pay the salaries prescribed by the council constitutes a prescription by law as  
15.18 provided in the Minnesota Constitution, article V, sections 4 and 5.

15.19 ~~(c) By April 1 in each odd-numbered year, the Compensation Council must prescribe~~  
15.20 ~~daily compensation for voting members of the Direct Care and Treatment executive board.~~  
15.21 ~~The recommended daily compensation takes effect on July 1 of that year and July 1 of the~~  
15.22 ~~subsequent even-numbered year and at whatever interval the council recommends thereafter,~~  
15.23 ~~unless the legislature by law provides otherwise.~~

15.24 Sec. 4. Minnesota Statutes 2024, section 15A.082, subdivision 7, is amended to read:

15.25 Subd. 7. **No ex parte communications.** Members may not have any communication  
15.26 with a constitutional officer, a head of a state agency, or a member of the judiciary, ~~or a~~  
15.27 ~~member of the Direct Care and Treatment executive board~~ during the period after the first  
15.28 meeting is convened under this section and the date the prescribed and recommended salaries  
15.29 ~~and daily compensation~~ are submitted under subdivision 3.

15.30 Sec. 5. Minnesota Statutes 2024, section 43A.08, subdivision 1, is amended to read:

15.31 Subdivision 1. **Unclassified positions.** Unclassified positions are held by employees  
15.32 who are:

- 16.1 (1) chosen by election or appointed to fill an elective office;
- 16.2 (2) heads of agencies required by law to be appointed by the governor or other elective  
16.3 officers, and the executive or administrative heads of departments, bureaus, divisions, and  
16.4 institutions specifically established by law in the unclassified service;
- 16.5 (3) deputy and assistant agency heads and one confidential secretary in the agencies  
16.6 listed in subdivision 1a;
- 16.7 (4) the confidential secretary to each of the elective officers of this state and, for the  
16.8 secretary of state and state auditor, an additional deputy, clerk, or employee;
- 16.9 (5) intermittent help employed by the commissioner of public safety to assist in the  
16.10 issuance of vehicle licenses;
- 16.11 (6) employees in the offices of the governor and of the lieutenant governor and one  
16.12 confidential employee for the governor in the Office of the Adjutant General;
- 16.13 (7) employees of the Washington, D.C., office of the state of Minnesota;
- 16.14 (8) employees of the legislature and of legislative committees or commissions; provided  
16.15 that employees of the Legislative Audit Commission, except for the legislative auditor, the  
16.16 deputy legislative auditors, and their confidential secretaries, shall be employees in the  
16.17 classified service;
- 16.18 (9) presidents, vice-presidents, deans, other managers and professionals in academic  
16.19 and academic support programs, administrative or service faculty, teachers, research  
16.20 assistants, and student employees eligible under terms of the federal Economic Opportunity  
16.21 Act work study program in the Perpich Center for Arts Education and the Minnesota State  
16.22 Colleges and Universities, but not the custodial, clerical, or maintenance employees, or any  
16.23 professional or managerial employee performing duties in connection with the business  
16.24 administration of these institutions;
- 16.25 (10) officers and enlisted persons in the National Guard;
- 16.26 (11) attorneys, legal assistants, and three confidential employees appointed by the attorney  
16.27 general or employed with the attorney general's authorization;
- 16.28 (12) judges and all employees of the judicial branch, referees, receivers, jurors, and  
16.29 notaries public, except referees and adjusters employed by the Department of Labor and  
16.30 Industry;
- 16.31 (13) members of the State Patrol; provided that selection and appointment of State Patrol  
16.32 troopers must be made in accordance with applicable laws governing the classified service;



17.1 (14) examination monitors and intermittent training instructors employed by the  
 17.2 Departments of Management and Budget and Commerce and by professional examining  
 17.3 boards and intermittent staff employed by the technical colleges for the administration of  
 17.4 practical skills tests and for the staging of instructional demonstrations;

17.5 (15) student workers;

17.6 (16) executive directors or executive secretaries appointed by and reporting to any  
 17.7 policy-making board or commission established by statute;

17.8 (17) employees unclassified pursuant to other statutory authority;

17.9 (18) intermittent help employed by the commissioner of agriculture to perform duties  
 17.10 relating to pesticides, fertilizer, and seed regulation;

17.11 (19) the administrators and the deputy administrators at the State Academies for the  
 17.12 Deaf and the Blind; and

17.13 (20) the chief executive officer of Direct Care and Treatment who serves as the deputy  
 17.14 agency head.

17.15 Sec. 6. Minnesota Statutes 2024, section 43A.08, subdivision 1a, is amended to read:

17.16 Subd. 1a. **Additional unclassified positions.** Appointing authorities for the following  
 17.17 agencies may designate additional unclassified positions according to this subdivision: the  
 17.18 Departments of Administration; Agriculture; Children, Youth, and Families; Commerce;  
 17.19 Corrections; Direct Care and Treatment; Education; Employment and Economic  
 17.20 Development; Explore Minnesota Tourism; Management and Budget; Health; Human  
 17.21 Rights; Human Services; Labor and Industry; Natural Resources; Public Safety; Revenue;  
 17.22 Transportation; and Veterans Affairs; the Housing Finance and Pollution Control Agencies;  
 17.23 the State Lottery; the State Board of Investment; the Office of Administrative Hearings; the  
 17.24 Department of Information Technology Services; the Offices of the Attorney General,  
 17.25 Secretary of State, and State Auditor; the Minnesota State Colleges and Universities; the  
 17.26 Minnesota Office of Higher Education; the Perpich Center for Arts Education; ~~Direct Care~~  
 17.27 ~~and Treatment~~; the Minnesota Zoological Board; and the Office of Emergency Medical  
 17.28 Services.

17.29 A position designated by an appointing authority according to this subdivision must  
 17.30 meet the following standards and criteria:

17.31 (1) the designation of the position would not be contrary to other law relating specifically  
 17.32 to that agency;

18.1 (2) the person occupying the position would report directly to the agency head or deputy  
18.2 agency head and would be designated as part of the agency head's management team;

18.3 (3) the duties of the position would involve significant discretion and substantial  
18.4 involvement in the development, interpretation, and implementation of agency policy;

18.5 (4) the duties of the position would not require primarily personnel, accounting, or other  
18.6 technical expertise where continuity in the position would be important;

18.7 (5) there would be a need for the person occupying the position to be accountable to,  
18.8 loyal to, and compatible with, the governor and the agency head, the employing statutory  
18.9 board or commission, or the employing constitutional officer;

18.10 (6) the position would be at the level of division or bureau director or assistant to the  
18.11 agency head; and

18.12 (7) the commissioner has approved the designation as being consistent with the standards  
18.13 and criteria in this subdivision.

18.14 Sec. 7. Minnesota Statutes 2024, section 245.021, is amended to read:

18.15 **245.021 ~~DEFINITIONS~~ DEFINITION.**

18.16 (a) For the purposes of this chapter, the ~~definitions~~ definition in this section ~~have~~ has  
18.17 the ~~meanings~~ meaning given ~~them~~.

18.18 (b) "Commissioner" means the commissioner of human services.

18.19 (c) ~~"Executive board" has the meaning given in section 246C.015.~~

18.20 Sec. 8. Minnesota Statutes 2024, section 245.073, is amended to read:

18.21 **245.073 TECHNICAL TRAINING; COMMUNITY-BASED PROGRAMS.**

18.22 (a) In conjunction with the discharge of persons from regional treatment centers and  
18.23 their admission to state-operated and privately operated community-based programs, the  
18.24 commissioner may provide technical training assistance to the community-based programs.  
18.25 The commissioner may apply for and accept money from any source including reimbursement  
18.26 charges from the community-based programs for reasonable costs of training. Money  
18.27 received must be deposited in the general fund and is appropriated annually to the  
18.28 commissioner of human services for training under this section.

18.29 (b) The commissioner must coordinate with the ~~executive board~~ commissioner of direct  
18.30 care and treatment or the commissioner's designee to provide technical training assistance  
18.31 to community-based programs under this section and section 246C.11, subdivision 5.

19.1 Sec. 9. Minnesota Statutes 2024, section 246.13, subdivision 1, is amended to read:

19.2 Subdivision 1. ~~Executive board~~ **Record responsibilities.** (a) The chief executive officer  
19.3 or a designee shall have, accessible only by consent of the ~~executive board~~ commissioner  
19.4 or on the order of a judge or court of record, a record showing:

19.5 (1) the residence, sex, age, nativity, occupation, civil condition, and date of entrance or  
19.6 commitment of every person, in the state-operated services facilities as defined under section  
19.7 246C.02 under exclusive control of the ~~executive board~~ commissioner;

19.8 (2) the date of discharge of any such person and whether such discharge was final;

19.9 (3) the condition of the person when the person left the state-operated services facility;

19.10 (4) the vulnerable adult abuse prevention associated with the person; and

19.11 (5) the date and cause of any death of such person.

19.12 (b) The record in paragraph (a) must state every transfer of a person from one  
19.13 state-operated services facility to another, naming each state-operated services facility. The  
19.14 head of each facility or a designee must provide this transfer information to the ~~executive~~  
19.15 ~~board~~ commissioner, along with other obtainable facts as the ~~executive board~~ commissioner  
19.16 requests.

19.17 (c) The head of the state-operated services facility or designee shall inform the ~~executive~~  
19.18 ~~board~~ commissioner of any discharge, transfer, or death of a person in that facility within  
19.19 ten days of the date of discharge, transfer, or death in a manner determined by the ~~executive~~  
19.20 ~~board~~ commissioner.

19.21 (d) The ~~executive board~~ commissioner shall maintain an adequate system of records and  
19.22 statistics for all basic record forms, including patient personal records and medical record  
19.23 forms. The use and maintenance of such records must be consistent throughout all  
19.24 state-operated services facilities.

19.25 Sec. 10. Minnesota Statutes 2024, section 246B.01, is amended by adding a subdivision  
19.26 to read:

19.27 Subd. 2e. **Commissioner.** "Commissioner" means the commissioner of direct care and  
19.28 treatment.

19.29 Sec. 11. Minnesota Statutes 2024, section 252.021, is amended by adding a subdivision  
19.30 to read:

19.31 Subd. 4. **Commissioner.** "Commissioner" means the commissioner of human services.

20.1 Sec. 12. Minnesota Statutes 2024, section 252.50, subdivision 5, is amended to read:

20.2 Subd. 5. **Location of programs.** (a) In determining the location of state-operated,  
20.3 community-based programs, the needs of the individual client shall be paramount. The  
20.4 ~~executive board~~ commissioner of direct care and treatment shall also take into account:

20.5 (1) prioritization of beds in state-operated, community-based programs for individuals  
20.6 with complex behavioral needs that cannot be met by private community-based providers;

20.7 (2) choices made by individuals who chose to move to a more integrated setting, and  
20.8 shall coordinate with the lead agency to ensure that appropriate person-centered transition  
20.9 plans are created;

20.10 (3) the personal preferences of the persons being served and their families as determined  
20.11 by Minnesota Rules, parts 9525.0004 to 9525.0036;

20.12 (4) the location of the support services established by the individual service plans of the  
20.13 persons being served;

20.14 (5) the appropriate grouping of the persons served;

20.15 (6) the availability of qualified staff;

20.16 (7) the need for state-operated, community-based programs in the geographical region  
20.17 of the state; and

20.18 (8) a reasonable commuting distance from a regional treatment center or the residences  
20.19 of the program staff.

20.20 (b) The ~~executive board~~ commissioner of direct care and treatment must locate  
20.21 state-operated, community-based programs in coordination with the commissioner of human  
20.22 services according to section 252.28.

20.23 Sec. 13. Minnesota Statutes 2024, section 253.195, is amended by adding a subdivision  
20.24 to read:

20.25 Subd. 2a. **Commissioner.** "Commissioner" means the commissioner of direct care and  
20.26 treatment.

20.27 Sec. 14. Minnesota Statutes 2024, section 253B.02, is amended by adding a subdivision  
20.28 to read:

20.29 Subd. 2a. **Commissioner.** "Commissioner" means the commissioner of direct care and  
20.30 treatment.

21.1 Sec. 15. Minnesota Statutes 2024, section 253B.02, subdivision 3, is amended to read:

21.2 Subd. 3. **Commissioner of human services.** "Commissioner of human services" means  
21.3 the commissioner of human services or the commissioner's designee.

21.4 Sec. 16. Minnesota Statutes 2024, section 253B.02, subdivision 4c, is amended to read:

21.5 Subd. 4c. **County of financial responsibility.** (a) "County of financial responsibility"  
21.6 has the meaning specified in chapter 256G. This definition does not require that the person  
21.7 qualifies for or receives any other form of financial, medical, or social service assistance  
21.8 in addition to the services under this chapter. Disputes about the county of financial  
21.9 responsibility shall be submitted for determination to the ~~executive board~~ commissioner  
21.10 through the commissioner of human services in the manner prescribed in section 256G.09.

21.11 (b) For purposes of proper venue for filing a petition pursuant to section 253B.064,  
21.12 subdivision 1, paragraph (a); 253B.07, subdivision 1, paragraph (a); or 253D.07, where the  
21.13 designated agency of a county has determined that it is the county of financial responsibility,  
21.14 then that county is the county of financial responsibility until a different determination is  
21.15 made by the appropriate county agencies or the commissioner of human services pursuant  
21.16 to chapter 256G.

21.17 Sec. 17. Minnesota Statutes 2024, section 253B.03, subdivision 7, is amended to read:

21.18 Subd. 7. **Treatment plan.** A patient receiving services under this chapter has the right  
21.19 to receive proper care and treatment, best adapted, according to contemporary professional  
21.20 standards, to rendering further supervision unnecessary. The treatment facility, state-operated  
21.21 treatment program, or community-based treatment program shall devise a written treatment  
21.22 plan for each patient which describes in behavioral terms the case problems, the precise  
21.23 goals, including the expected period of time for treatment, and the specific measures to be  
21.24 employed. The development and review of treatment plans must be conducted as required  
21.25 under the license or certification of the treatment facility, state-operated treatment program,  
21.26 or community-based treatment program. If there are no review requirements under the  
21.27 license or certification, the treatment plan must be reviewed quarterly. The treatment plan  
21.28 shall be devised and reviewed with the designated agency and with the patient. The clinical  
21.29 record shall reflect the treatment plan review. If the designated agency or the patient does  
21.30 not participate in the planning and review, the clinical record shall include reasons for  
21.31 nonparticipation and the plans for future involvement. The commissioner of human services  
21.32 shall monitor the treatment plan and review process for state-operated treatment programs  
21.33 to ensure compliance with the provisions of this subdivision.

22.1 Sec. 18. Minnesota Statutes 2024, section 253B.041, subdivision 4, is amended to read:

22.2 Subd. 4. **Evaluation.** Counties may, but are not required to, provide engagement services.  
22.3 The commissioner of human services may conduct a pilot project evaluating the impact of  
22.4 engagement services in decreasing commitments, increasing engagement in treatment, and  
22.5 other measures.

22.6 Sec. 19. Minnesota Statutes 2024, section 253B.09, subdivision 3a, is amended to read:

22.7 Subd. 3a. **Reporting judicial commitments; private treatment program or**  
22.8 **facility.** Notwithstanding section 253B.23, subdivision 9, when a court commits a patient  
22.9 to a non-state-operated treatment facility or program, the court shall report the commitment  
22.10 to the commissioner through the supreme court information system for purposes of providing  
22.11 commitment information for firearm background checks under section 246C.15. If the  
22.12 patient is committed to a state-operated treatment program, the court shall send a copy of  
22.13 the commitment order to the commissioner ~~and the executive board~~.

22.14 Sec. 20. Minnesota Statutes 2024, section 253B.18, subdivision 6, is amended to read:

22.15 Subd. 6. **Transfer.** (a) A patient who is a person who has a mental illness and is  
22.16 dangerous to the public shall not be transferred out of a secure treatment facility unless it  
22.17 appears to the satisfaction of the ~~executive board~~ commissioner, after a hearing and favorable  
22.18 recommendation by a majority of the special review board, that the transfer is appropriate.  
22.19 Transfer may be to another state-operated treatment program. In those instances where a  
22.20 commitment also exists to the Department of Corrections, transfer may be to a facility  
22.21 designated by the commissioner of corrections.

22.22 (b) The following factors must be considered in determining whether a transfer is  
22.23 appropriate:

22.24 (1) the person's clinical progress and present treatment needs;

22.25 (2) the need for security to accomplish continuing treatment;

22.26 (3) the need for continued institutionalization;

22.27 (4) which facility can best meet the person's needs; and

22.28 (5) whether transfer can be accomplished with a reasonable degree of safety for the  
22.29 public.

23.1 (c) If a committed person has been transferred out of a secure treatment facility pursuant  
23.2 to this subdivision, that committed person may voluntarily return to a secure treatment  
23.3 facility for a period of up to 60 days with the consent of the head of the treatment facility.

23.4 (d) If the committed person is not returned to the original, nonsecure transfer facility  
23.5 within 60 days of being readmitted to a secure treatment facility, the transfer is revoked and  
23.6 the committed person must remain in a secure treatment facility. The committed person  
23.7 must immediately be notified in writing of the revocation.

23.8 (e) Within 15 days of receiving notice of the revocation, the committed person may  
23.9 petition the special review board for a review of the revocation. The special review board  
23.10 shall review the circumstances of the revocation and shall recommend to the commissioner  
23.11 whether or not the revocation should be upheld. The special review board may also  
23.12 recommend a new transfer at the time of the revocation hearing.

23.13 (f) No action by the special review board is required if the transfer has not been revoked  
23.14 and the committed person is returned to the original, nonsecure transfer facility with no  
23.15 substantive change to the conditions of the transfer ordered under this subdivision.

23.16 (g) The head of the treatment facility may revoke a transfer made under this subdivision  
23.17 and require a committed person to return to a secure treatment facility if:

23.18 (1) remaining in a nonsecure setting does not provide a reasonable degree of safety to  
23.19 the committed person or others; or

23.20 (2) the committed person has regressed clinically and the facility to which the committed  
23.21 person was transferred does not meet the committed person's needs.

23.22 (h) Upon the revocation of the transfer, the committed person must be immediately  
23.23 returned to a secure treatment facility. A report documenting the reasons for revocation  
23.24 must be issued by the head of the treatment facility within seven days after the committed  
23.25 person is returned to the secure treatment facility. Advance notice to the committed person  
23.26 of the revocation is not required.

23.27 (i) The committed person must be provided a copy of the revocation report and informed,  
23.28 orally and in writing, of the rights of a committed person under this section. The revocation  
23.29 report must be served upon the committed person, the committed person's counsel, and the  
23.30 designated agency. The report must outline the specific reasons for the revocation, including  
23.31 but not limited to the specific facts upon which the revocation is based.

23.32 (j) If a committed person's transfer is revoked, the committed person may re-petition for  
23.33 transfer according to subdivision 5.

24.1 (k) A committed person aggrieved by a transfer revocation decision may petition the  
24.2 special review board within seven business days after receipt of the revocation report for a  
24.3 review of the revocation. The matter must be scheduled within 30 days. The special review  
24.4 board shall review the circumstances leading to the revocation and, after considering the  
24.5 factors in paragraph (b), shall recommend to the commissioner whether or not the revocation  
24.6 shall be upheld. The special review board may also recommend a new transfer out of a  
24.7 secure treatment facility at the time of the revocation hearing.

24.8 Sec. 21. Minnesota Statutes 2024, section 253B.19, subdivision 2, is amended to read:

24.9 Subd. 2. **Petition; hearing.** (a) A patient committed as a person who has a mental illness  
24.10 and is dangerous to the public under section 253B.18, or the county attorney of the county  
24.11 from which the patient was committed or the county of financial responsibility, may petition  
24.12 the judicial appeal panel for a rehearing and reconsideration of a decision by the  
24.13 commissioner under section 253B.18, subdivision 5. The judicial appeal panel must not  
24.14 consider petitions for relief other than those considered by the ~~executive board~~ commissioner  
24.15 from which the appeal is taken. The petition must be filed with the supreme court within  
24.16 30 days after the decision of the ~~executive board~~ commissioner is signed. The hearing must  
24.17 be held within 45 days of the filing of the petition unless an extension is granted for good  
24.18 cause.

24.19 (b) For an appeal under paragraph (a), the supreme court shall refer the petition to the  
24.20 chief judge of the judicial appeal panel. The chief judge shall notify the patient, the county  
24.21 attorney of the county of commitment, the designated agency, the ~~executive board~~  
24.22 commissioner, the head of the facility or program to which the patient was committed, any  
24.23 interested person, and other persons the chief judge designates, of the time and place of the  
24.24 hearing on the petition. The notice shall be given at least 14 days prior to the date of the  
24.25 hearing.

24.26 (c) Any person may oppose the petition. The patient, the patient's counsel, the county  
24.27 attorney of the committing county or the county of financial responsibility, and the ~~executive~~  
24.28 ~~board~~ commissioner shall participate as parties to the proceeding pending before the judicial  
24.29 appeal panel and shall, except when the patient is committed solely as a person who has a  
24.30 mental illness and is dangerous to the public, no later than 20 days before the hearing on  
24.31 the petition, inform the judicial appeal panel and the opposing party in writing whether they  
24.32 support or oppose the petition and provide a summary of facts in support of their position.  
24.33 The judicial appeal panel may appoint court examiners and may adjourn the hearing from  
24.34 time to time. It shall hear and receive all relevant testimony and evidence and make a record



25.1 of all proceedings. The patient, the patient's counsel, and the county attorney of the  
25.2 committing county or the county of financial responsibility have the right to be present and  
25.3 may present and cross-examine all witnesses and offer a factual and legal basis in support  
25.4 of their positions. The petitioning party seeking discharge or provisional discharge bears  
25.5 the burden of going forward with the evidence, which means presenting a prima facie case  
25.6 with competent evidence to show that the person is entitled to the requested relief. If the  
25.7 petitioning party has met this burden, the party opposing discharge or provisional discharge  
25.8 bears the burden of proof by clear and convincing evidence that the discharge or provisional  
25.9 discharge should be denied. A party seeking transfer under section 253B.18, subdivision 6,  
25.10 must establish by a preponderance of the evidence that the transfer is appropriate.

25.11 Sec. 22. Minnesota Statutes 2024, section 253B.20, subdivision 2, is amended to read:

25.12 Subd. 2. **Necessities.** (a) The state-operated treatment program shall make necessary  
25.13 arrangements at the expense of the state to insure that no patient is discharged or provisionally  
25.14 discharged without suitable clothing. The head of the state-operated treatment program  
25.15 shall, if necessary, provide the patient with a sufficient sum of money to secure transportation  
25.16 home, or to another destination of the patient's choice, if the destination is located within a  
25.17 reasonable distance of the state-operated treatment program.

25.18 (b) The commissioner of human services shall establish procedures by rule to help the  
25.19 patient receive all public assistance benefits provided by state or federal law to which the  
25.20 patient is entitled by residence and circumstances. The rule shall be uniformly applied in  
25.21 all counties. All counties shall provide temporary relief whenever necessary to meet the  
25.22 intent of this subdivision.

25.23 (c) The commissioner of human services and the ~~executive board~~ commissioner may  
25.24 adopt joint rules necessary to accomplish the requirements under paragraph (b).

25.25 Sec. 23. Minnesota Statutes 2024, section 253D.02, is amended by adding a subdivision  
25.26 to read:

25.27 Subd. 2a. **Commissioner.** "Commissioner" means the commissioner of direct care and  
25.28 treatment.

25.29 Sec. 24. Minnesota Statutes 2024, section 253D.02, subdivision 3, is amended to read:

25.30 Subd. 3. **Commissioner of corrections.** "Commissioner of corrections" means the  
25.31 commissioner of corrections or the commissioner's designee.

26.1 Sec. 25. Minnesota Statutes 2024, section 254B.05, subdivision 4, is amended to read:

26.2 Subd. 4. **Regional treatment centers.** Regional treatment center substance use disorder  
26.3 treatment units are eligible vendors. The ~~executive board~~ commissioner of direct care and  
26.4 treatment may expand the capacity of substance use disorder treatment units beyond the  
26.5 capacity funded by direct legislative appropriation to serve individuals who are referred for  
26.6 treatment by counties and whose treatment will be paid for by funding under this chapter  
26.7 or other funding sources. Notwithstanding the provisions of sections 254B.03 to 254B.04,  
26.8 payment for any person committed at county request to a regional treatment center under  
26.9 chapter 253B for chemical dependency treatment and determined to be ineligible under the  
26.10 behavioral health fund, shall become the responsibility of the county.

26.11 Sec. 26. Minnesota Statutes 2024, section 256.045, is amended by adding a subdivision  
26.12 to read:

26.13 Subd. 1b. Commissioner. For purposes of this section, "commissioner" means the  
26.14 commissioner of human services.

26.15 Sec. 27. Minnesota Statutes 2024, section 256.045, subdivision 6, is amended to read:

26.16 Subd. 6. **Additional powers of commissioner; subpoenas.** (a) The commissioner of  
26.17 human services, the commissioner of health for matters within the commissioner's jurisdiction  
26.18 under subdivision 3b, or the ~~Direct Care and Treatment executive board~~ commissioner of  
26.19 direct care and treatment for matters within the commissioner's jurisdiction ~~of the executive~~  
26.20 ~~board~~ under subdivision 5a, may initiate a review of any action or decision of a county  
26.21 agency and direct that the matter be presented to a state human services judge for a hearing  
26.22 held under subdivision 3, 3a, 3b, or 4a. In all matters dealing with human services committed  
26.23 by law to the discretion of the county agency, the judgment of the applicable commissioner  
26.24 ~~or executive board~~ may be substituted for that of the county agency. The applicable  
26.25 commissioner ~~or executive board~~ may order an independent examination when appropriate.

26.26 (b) Any party to a hearing held pursuant to subdivision 3, 3a, 3b, or 4a may request that  
26.27 the applicable commissioner ~~or executive board~~ issue a subpoena to compel the attendance  
26.28 of witnesses and the production of records at the hearing. A local agency may request that  
26.29 the applicable commissioner ~~or executive board~~ issue a subpoena to compel the release of  
26.30 information from third parties prior to a request for a hearing under section 256.046 upon  
26.31 a showing of relevance to such a proceeding. The issuance, service, and enforcement of  
26.32 subpoenas under this subdivision is governed by section 357.22 and the Minnesota Rules  
26.33 of Civil Procedure.

27.1 (c) The commissioner of human services may issue a temporary order staying a proposed  
27.2 demission by a residential facility licensed under chapter 245A:

27.3 (1) while an appeal by a recipient under subdivision 3 is pending;

27.4 (2) for the period of time necessary for the case management provider to implement the  
27.5 commissioner's order; or

27.6 (3) for appeals under subdivision 3, paragraph (a), clause (11), when the individual is  
27.7 seeking a temporary stay of demission on the basis that the county has not yet finalized an  
27.8 alternative arrangement for a residential facility, a program, or services that will meet the  
27.9 assessed needs of the individual by the effective date of the service termination, a temporary  
27.10 stay of demission may be issued for no more than 30 calendar days to allow for such  
27.11 arrangements to be finalized.

27.12 Sec. 28. Minnesota Statutes 2024, section 256.045, subdivision 7, is amended to read:

27.13 Subd. 7. **Judicial review.** Except for a prepaid health plan, any party who is aggrieved  
27.14 by an order of the commissioner of human services; the commissioner of health; or the  
27.15 commissioner of children, youth, and families in appeals within the commissioner's  
27.16 jurisdiction under subdivision 3b; or the ~~Direct Care and Treatment executive board~~  
27.17 commissioner of direct care and treatment in appeals within the commissioner's jurisdiction  
27.18 ~~of the executive board~~ under subdivision 5a may appeal the order to the district court of the  
27.19 county responsible for furnishing assistance, or, in appeals under subdivision 3b, the county  
27.20 where the maltreatment occurred, by serving a written copy of a notice of appeal upon the  
27.21 applicable commissioner ~~or executive board~~ and any adverse party of record within 30 days  
27.22 after the date the commissioner ~~or executive board~~ issued the order, the amended order, or  
27.23 order affirming the original order, and by filing the original notice and proof of service with  
27.24 the court administrator of the district court. Service may be made personally or by mail;  
27.25 service by mail is complete upon mailing; no filing fee shall be required by the court  
27.26 administrator in appeals taken pursuant to this subdivision, with the exception of appeals  
27.27 taken under subdivision 3b. The applicable commissioner ~~or executive board~~ may elect to  
27.28 become a party to the proceedings in the district court. Except for appeals under subdivision  
27.29 3b, any party may demand that the applicable commissioner ~~or executive board~~ furnish all  
27.30 parties to the proceedings with a copy of the decision, and a transcript of any testimony,  
27.31 evidence, or other supporting papers from the hearing held before the human services judge,  
27.32 by serving a written demand upon the applicable commissioner ~~or executive board~~ within  
27.33 30 days after service of the notice of appeal. Any party aggrieved by the failure of an adverse  
27.34 party to obey an order issued by the applicable commissioner ~~or executive board~~ under

28.1 subdivision 5 or 5a may compel performance according to the order in the manner prescribed  
 28.2 in sections 586.01 to 586.12.

28.3 Sec. 29. Minnesota Statutes 2024, section 256G.09, subdivision 3, is amended to read:

28.4 Subd. 3. **Commissioner obligations.** (a) Except as provided in paragraph (b) for matters  
 28.5 under the jurisdiction of the ~~Direct Care and Treatment executive board~~ commissioner of  
 28.6 direct care and treatment, the commissioner shall then promptly decide any question of  
 28.7 financial responsibility as outlined in this chapter and make an order referring the application  
 28.8 to the local agency of the proper county for further action. Further action may include  
 28.9 reimbursement by that county of assistance that another county has provided to the applicant  
 28.10 under this subdivision. The commissioner shall decide disputes within 60 days of the last  
 28.11 county evidentiary submission and shall issue an immediate opinion.

28.12 (b) For disputes regarding financial responsibility relating to matters under the jurisdiction  
 28.13 of the ~~direct care and treatment executive board~~ commissioner of direct care and treatment,  
 28.14 the commissioner shall promptly issue an advisory opinion on any question of financial  
 28.15 responsibility as outlined in this chapter and recommend to the ~~executive board~~ commissioner  
 28.16 of direct care and treatment an order referring the application to the local agency of the  
 28.17 proper county for further action. Further action may include reimbursement by that county  
 28.18 of assistance that another county has provided to the applicant under this subdivision. The  
 28.19 commissioner shall provide an advisory opinion and recommended order to the ~~executive~~  
 28.20 ~~board~~ commissioner of direct care and treatment within 30 days of the last county evidentiary  
 28.21 submission. The ~~executive board~~ commissioner of direct care and treatment shall decide to  
 28.22 accept or reject the commissioner's advisory opinion and recommended order within 60  
 28.23 days of the last county evidentiary submission and shall issue an immediate opinion stating  
 28.24 the reasons for accepting or rejecting the commissioner's recommendation.

28.25 (c) The commissioner may make any investigation ~~if~~ the commissioner considers proper  
 28.26 before making a decision or a recommendation to the ~~executive board~~ commissioner of  
 28.27 direct care and treatment. The commissioner may prescribe rules ~~if~~ the commissioner  
 28.28 considers necessary to carry out this subdivision except that the commissioner must not  
 28.29 create rules purporting to bind the ~~executive board's~~ decision of the commissioner of direct  
 28.30 care and treatment on any advisory opinion or recommended order under paragraph (b).

28.31 (d) Except as provided in paragraph (e) for matters under the jurisdiction of the ~~executive~~  
 28.32 ~~board~~ commissioner of direct care and treatment, the order of the commissioner binds the  
 28.33 local agency involved and the applicant or recipient. That agency shall comply with the

29.1 order unless reversed on appeal as provided in section 256.045, subdivision 7. The agency  
29.2 shall comply with the order pending the appeal.

29.3 (e) For disputes regarding financial responsibility relating to matters under the jurisdiction  
29.4 of the ~~Direct Care and Treatment executive board~~ commissioner of direct care and treatment,  
29.5 the order of the ~~executive board~~ commissioner of direct care and treatment binds the local  
29.6 agency involved and the applicant or recipient. That agency shall comply with the order of  
29.7 the ~~executive board~~ commissioner of direct care and treatment unless the order is reversed  
29.8 on appeal as provided in section 256.045, subdivision 7. The agency shall comply with the  
29.9 order of the ~~executive board~~ commissioner of direct care and treatment pending the appeal.

29.10 Sec. 30. Minnesota Statutes 2024, section 352.91, subdivision 2a, is amended to read:

29.11 Subd. 2a. **Special teachers.** "Covered correctional service" also means service rendered  
29.12 by a state employee as a special teacher employed by the Department of Corrections or by  
29.13 the Department of Direct Care and Treatment at a security unit, provided that at least 75  
29.14 percent of the employee's working time is spent in direct contact with inmates or patients  
29.15 and the fact of this direct contact is certified to the executive director by the appropriate  
29.16 commissioner ~~or executive board~~, unless the person elects to retain the current retirement  
29.17 coverage under Laws 1996, chapter 408, article 8, section 21.

29.18 Sec. 31. Minnesota Statutes 2024, section 352.91, subdivision 3c, is amended to read:

29.19 Subd. 3c. **Nursing personnel.** (a) "Covered correctional service" means service by a  
29.20 state employee in one of the employment positions at a correctional facility, in the  
29.21 state-operated forensic services program, or in the Minnesota Sex Offender Program that  
29.22 are specified in paragraph (b) if at least 75 percent of the employee's working time is spent  
29.23 in direct contact with inmates or patients and the fact of this direct contact is certified to the  
29.24 executive director by the appropriate commissioner ~~or executive board~~.

29.25 (b) The employment positions are as follows:

29.26 (1) registered nurse - senior;

29.27 (2) registered nurse;

29.28 (3) registered nurse - principal;

29.29 (4) licensed practical nurse;

29.30 (5) registered nurse advance practice; and

29.31 (6) psychiatric advance practice registered nurse.

30.1 Sec. 32. Minnesota Statutes 2024, section 352.91, subdivision 3d, is amended to read:

30.2 Subd. 3d. **Other correctional personnel.** (a) "Covered correctional service" means  
30.3 service by a state employee in one of the employment positions at a correctional facility or  
30.4 in the state-operated forensic services program specified in paragraph (b) if at least 75  
30.5 percent of the employee's working time is spent in direct contact with inmates or patients  
30.6 and the fact of this direct contact is certified to the executive director by the appropriate  
30.7 commissioner ~~or executive board~~.

30.8 (b) The employment positions are:

30.9 (1) automotive mechanic;

30.10 (2) baker;

30.11 (3) central services administrative specialist, intermediate;

30.12 (4) central services administrative specialist, principal;

30.13 (5) chaplain;

30.14 (6) chief cook;

30.15 (7) clinical program therapist 1;

30.16 (8) clinical program therapist 2;

30.17 (9) clinical program therapist 3;

30.18 (10) clinical program therapist 4;

30.19 (11) cook;

30.20 (12) cook coordinator;

30.21 (13) corrections inmate program coordinator;

30.22 (14) corrections transitions program coordinator;

30.23 (15) corrections security caseworker;

30.24 (16) corrections security caseworker career;

30.25 (17) corrections teaching assistant;

30.26 (18) delivery van driver;

30.27 (19) dentist;

30.28 (20) electrician supervisor;

- 31.1 (21) general maintenance worker lead;
- 31.2 (22) general repair worker;
- 31.3 (23) library/information research services specialist;
- 31.4 (24) library/information research services specialist senior;
- 31.5 (25) library technician;
- 31.6 (26) painter lead;
- 31.7 (27) plant maintenance engineer lead;
- 31.8 (28) plumber supervisor;
- 31.9 (29) psychologist 1;
- 31.10 (30) psychologist 3;
- 31.11 (31) recreation therapist;
- 31.12 (32) recreation therapist coordinator;
- 31.13 (33) recreation program assistant;
- 31.14 (34) recreation therapist senior;
- 31.15 (35) sports medicine specialist;
- 31.16 (36) work therapy assistant;
- 31.17 (37) work therapy program coordinator; and
- 31.18 (38) work therapy technician.

31.19 Sec. 33. Minnesota Statutes 2024, section 352.91, subdivision 4a, is amended to read:

31.20 Subd. 4a. **Process for evaluating and recommending potential employment positions**  
 31.21 **for membership inclusion.** (a) The Department of Corrections and the Department of  
 31.22 Direct Care and Treatment must establish a procedure for evaluating periodic requests by  
 31.23 department ~~and agency~~ employees for qualification for recommendation by the applicable  
 31.24 commissioner ~~or executive board~~ for inclusion of the employment position in the correctional  
 31.25 facility or direct care and treatment facility in the correctional retirement plan and for  
 31.26 periodically determining employment positions that no longer qualify for continued  
 31.27 correctional retirement plan coverage.

31.28 (b) The procedure must provide for an evaluation of the extent of the employee's working  
 31.29 time spent in direct contact with patients or inmates, the extent of the physical hazard that

32.1 the employee is routinely subjected to in the course of employment, and the extent of  
32.2 intervention routinely expected of the employee in the event of a facility incident. The  
32.3 percentage of routine direct contact with inmates or patients may not be less than 75 percent.

32.4 (c) The applicable commissioner ~~or executive board~~ shall notify the employee of the  
32.5 determination of the appropriateness of recommending the employment position for inclusion  
32.6 in the correctional retirement plan, if the evaluation procedure results in a finding that the  
32.7 employee:

32.8 (1) routinely spends 75 percent of the employee's time in direct contact with inmates or  
32.9 patients; and

32.10 (2) is regularly engaged in the rehabilitation, treatment, custody, or supervision of inmates  
32.11 or patients.

32.12 (d) After providing the affected employee an opportunity to dispute or clarify any  
32.13 evaluation determinations, if the applicable commissioner ~~or executive board~~ determines  
32.14 that the employment position is appropriate for inclusion in the correctional retirement plan,  
32.15 the commissioner ~~or executive board~~ shall forward that recommendation and supporting  
32.16 documentation to the chair of the Legislative Commission on Pensions and Retirement, the  
32.17 chair of the State and Local Governmental Operations Committee of the senate, the chair  
32.18 of the Governmental Operations and Veterans Affairs Policy Committee of the house of  
32.19 representatives, and the executive director of the Legislative Commission on Pensions and  
32.20 Retirement in the form of the appropriate proposed legislation. The recommendation must  
32.21 be forwarded to the legislature before January 15 for the recommendation to be considered  
32.22 in that year's legislative session.

32.23 Sec. 34. Minnesota Statutes 2024, section 524.3-801, is amended to read:

32.24 **524.3-801 NOTICE TO CREDITORS.**

32.25 (a) Unless notice has already been given under this section, upon appointment of a  
32.26 general personal representative in informal proceedings or upon the filing of a petition for  
32.27 formal appointment of a general personal representative, notice thereof, in the form prescribed  
32.28 by court rule, shall be given under the direction of the court administrator by publication  
32.29 once a week for two successive weeks in a legal newspaper in the county wherein the  
32.30 proceedings are pending giving the name and address of the general personal representative  
32.31 and notifying creditors of the estate to present their claims within four months after the date  
32.32 of the court administrator's notice which is subsequently published or be forever barred,  
32.33 unless they are entitled to further service of notice under paragraph (b) or (c).



33.1 (b) The personal representative shall, within three months after the date of the first  
33.2 publication of the notice, serve a copy of the notice upon each then known and identified  
33.3 creditor in the manner provided in paragraph (c). If the decedent or a predeceased spouse  
33.4 of the decedent received assistance for which a claim could be filed under section 246.53,  
33.5 256B.15, 256D.16, or 261.04, notice to the commissioner of human services or ~~Direct Care~~  
33.6 ~~and Treatment executive board~~ the commissioner of direct care and treatment, as applicable,  
33.7 must be given under paragraph (d) instead of under this paragraph or paragraph (c). A  
33.8 creditor is "known" if: (i) the personal representative knows that the creditor has asserted  
33.9 a claim that arose during the decedent's life against either the decedent or the decedent's  
33.10 estate; (ii) the creditor has asserted a claim that arose during the decedent's life and the fact  
33.11 is clearly disclosed in accessible financial records known and available to the personal  
33.12 representative; or (iii) the claim of the creditor would be revealed by a reasonably diligent  
33.13 search for creditors of the decedent in accessible financial records known and available to  
33.14 the personal representative. Under this section, a creditor is "identified" if the personal  
33.15 representative's knowledge of the name and address of the creditor will permit service of  
33.16 notice to be made under paragraph (c).

33.17 (c) Unless the claim has already been presented to the personal representative or paid,  
33.18 the personal representative shall serve a copy of the notice required by paragraph (b) upon  
33.19 each creditor of the decedent who is then known to the personal representative and identified  
33.20 either by delivery of a copy of the required notice to the creditor, or by mailing a copy of  
33.21 the notice to the creditor by certified, registered, or ordinary first class mail addressed to  
33.22 the creditor at the creditor's office or place of residence.

33.23 (d)(1) Effective for decedents dying on or after July 1, 1997, if the decedent or a  
33.24 predeceased spouse of the decedent received assistance for which a claim could be filed  
33.25 under section 246.53, 256B.15, 256D.16, or 261.04, the personal representative or the  
33.26 attorney for the personal representative shall serve the commissioner of human services or  
33.27 ~~executive board~~ the commissioner of direct care and treatment, as applicable, with notice  
33.28 in the manner prescribed in paragraph (c), or electronically in a manner prescribed by the  
33.29 applicable commissioner ~~or executive board~~, as soon as practicable after the appointment  
33.30 of the personal representative. The notice must state the decedent's full name, date of birth,  
33.31 and Social Security number and, to the extent then known after making a reasonably diligent  
33.32 inquiry, the full name, date of birth, and Social Security number for each of the decedent's  
33.33 predeceased spouses. The notice may also contain a statement that, after making a reasonably  
33.34 diligent inquiry, the personal representative has determined that the decedent did not have  
33.35 any predeceased spouses or that the personal representative has been unable to determine

34.1 one or more of the previous items of information for a predeceased spouse of the decedent.  
34.2 A copy of the notice to creditors must be attached to and be a part of the notice to the  
34.3 applicable commissioner ~~or executive board~~.

34.4 (2) Notwithstanding a will or other instrument or law to the contrary, except as allowed  
34.5 in this paragraph, no property subject to administration by the estate may be distributed by  
34.6 the estate or the personal representative until 70 days after the date the notice is served on  
34.7 the commissioner of human services or ~~executive board~~ commissioner of direct care and  
34.8 treatment as provided in paragraph (c), unless the local agency consents as provided for in  
34.9 clause (6). This restriction on distribution does not apply to the personal representative's  
34.10 sale of real or personal property, but does apply to the net proceeds the estate receives from  
34.11 these sales. The personal representative, or any person with personal knowledge of the facts,  
34.12 may provide an affidavit containing the description of any real or personal property affected  
34.13 by this paragraph and stating facts showing compliance with this paragraph. If the affidavit  
34.14 describes real property, it may be filed or recorded in the office of the county recorder or  
34.15 registrar of titles for the county where the real property is located. This paragraph does not  
34.16 apply to proceedings under sections 524.3-1203 and 525.31, or when a duly authorized  
34.17 agent of a county is acting as the personal representative of the estate.

34.18 (3) At any time before an order or decree is entered under section 524.3-1001 or  
34.19 524.3-1002, or a closing statement is filed under section 524.3-1003, the personal  
34.20 representative or the attorney for the personal representative may serve an amended notice  
34.21 on the commissioner of human services or ~~executive board~~ commissioner of direct care and  
34.22 treatment to add variations or other names of the decedent or a predeceased spouse named  
34.23 in the notice, the name of a predeceased spouse omitted from the notice, to add or correct  
34.24 the date of birth or Social Security number of a decedent or predeceased spouse named in  
34.25 the notice, or to correct any other deficiency in a prior notice. The amended notice must  
34.26 state the decedent's name, date of birth, and Social Security number, the case name, case  
34.27 number, and district court in which the estate is pending, and the date the notice being  
34.28 amended was served on the applicable commissioner ~~or executive board~~. If the amendment  
34.29 adds the name of a predeceased spouse omitted from the notice, it must also state that  
34.30 spouse's full name, date of birth, and Social Security number. The amended notice must be  
34.31 served on the applicable commissioner ~~or executive board~~ in the same manner as the original  
34.32 notice. Upon service, the amended notice relates back to and is effective from the date the  
34.33 notice it amends was served, and the time for filing claims arising under section 246.53,  
34.34 256B.15, 256D.16 or 261.04 is extended by 60 days from the date of service of the amended  
34.35 notice. Claims filed during the 60-day period are undischarged and unbarred claims, may

35.1 be prosecuted by the entities entitled to file those claims in accordance with section  
35.2 524.3-1004, and the limitations in section 524.3-1006 do not apply. The personal  
35.3 representative or any person with personal knowledge of the facts may provide and file or  
35.4 record an affidavit in the same manner as provided for in clause (1).

35.5 (4) Within one year after the date an order or decree is entered under section 524.3-1001  
35.6 or 524.3-1002 or a closing statement is filed under section 524.3-1003, any person who has  
35.7 an interest in property that was subject to administration by the estate may serve an amended  
35.8 notice on the commissioner of human services or ~~executive board~~ commissioner of direct  
35.9 care and treatment to add variations or other names of the decedent or a predeceased spouse  
35.10 named in the notice, the name of a predeceased spouse omitted from the notice, to add or  
35.11 correct the date of birth or Social Security number of a decedent or predeceased spouse  
35.12 named in the notice, or to correct any other deficiency in a prior notice. The amended notice  
35.13 must be served on the applicable commissioner or ~~executive board~~ in the same manner as  
35.14 the original notice and must contain the information required for amendments under clause  
35.15 (3). If the amendment adds the name of a predeceased spouse omitted from the notice, it  
35.16 must also state that spouse's full name, date of birth, and Social Security number. Upon  
35.17 service, the amended notice relates back to and is effective from the date the notice it amends  
35.18 was served. If the amended notice adds the name of an omitted predeceased spouse or adds  
35.19 or corrects the Social Security number or date of birth of the decedent or a predeceased  
35.20 spouse already named in the notice, then, notwithstanding any other laws to the contrary,  
35.21 claims against the decedent's estate on account of those persons resulting from the amendment  
35.22 and arising under section 246.53, 256B.15, 256D.16, or 261.04 are undischarged and  
35.23 unbarred claims, may be prosecuted by the entities entitled to file those claims in accordance  
35.24 with section 524.3-1004, and the limitations in section 524.3-1006 do not apply. The person  
35.25 filing the amendment or any other person with personal knowledge of the facts may provide  
35.26 and file or record an affidavit describing affected real or personal property in the same  
35.27 manner as clause (1).

35.28 (5) After one year from the date an order or decree is entered under section 524.3-1001  
35.29 or 524.3-1002, or a closing statement is filed under section 524.3-1003, no error, omission,  
35.30 or defect of any kind in the notice to the commissioner of human services or ~~executive board~~  
35.31 commissioner of direct care and treatment required under this paragraph or in the process  
35.32 of service of the notice on the applicable commissioner or ~~executive board~~, or the failure  
35.33 to serve the applicable commissioner or ~~executive board~~ with notice as required by this  
35.34 paragraph, makes any distribution of property by a personal representative void or voidable.

36.1 The distributee's title to the distributed property shall be free of any claims based upon a  
36.2 failure to comply with this paragraph.

36.3 (6) The local agency may consent to a personal representative's request to distribute  
36.4 property subject to administration by the estate to distributees during the 70-day period after  
36.5 service of notice on the applicable commissioner ~~or executive board~~. The local agency may  
36.6 grant or deny the request in whole or in part and may attach conditions to its consent as it  
36.7 deems appropriate. When the local agency consents to a distribution, it shall give the estate  
36.8 a written certificate evidencing its consent to the early distribution of assets at no cost. The  
36.9 certificate must include the name, case number, and district court in which the estate is  
36.10 pending, the name of the local agency, describe the specific real or personal property to  
36.11 which the consent applies, state that the local agency consents to the distribution of the  
36.12 specific property described in the consent during the 70-day period following service of the  
36.13 notice on the applicable commissioner ~~or executive board~~, state that the consent is  
36.14 unconditional or list all of the terms and conditions of the consent, be dated, and may include  
36.15 other contents as may be appropriate. The certificate must be signed by the director of the  
36.16 local agency or the director's designees and is effective as of the date it is dated unless it  
36.17 provides otherwise. The signature of the director or the director's designee does not require  
36.18 any acknowledgment. The certificate shall be prima facie evidence of the facts it states,  
36.19 may be attached to or combined with a deed or any other instrument of conveyance and,  
36.20 when so attached or combined, shall constitute a single instrument. If the certificate describes  
36.21 real property, it shall be accepted for recording or filing by the county recorder or registrar  
36.22 of titles in the county in which the property is located. If the certificate describes real property  
36.23 and is not attached to or combined with a deed or other instrument of conveyance, it shall  
36.24 be accepted for recording or filing by the county recorder or registrar of titles in the county  
36.25 in which the property is located. The certificate constitutes a waiver of the 70-day period  
36.26 provided for in clause (2) with respect to the property it describes and is prima facie evidence  
36.27 of service of notice on the applicable commissioner ~~or executive board~~. The certificate is  
36.28 not a waiver or relinquishment of any claims arising under section 246.53, 256B.15, 256D.16,  
36.29 or 261.04, and does not otherwise constitute a waiver of any of the personal representative's  
36.30 duties under this paragraph. Distributees who receive property pursuant to a consent to an  
36.31 early distribution shall remain liable to creditors of the estate as provided for by law.

36.32 (7) All affidavits provided for under this paragraph:

36.33 (i) shall be provided by persons who have personal knowledge of the facts stated in the  
36.34 affidavit;

37.1 (ii) may be filed or recorded in the office of the county recorder or registrar of titles in  
37.2 the county in which the real property they describe is located for the purpose of establishing  
37.3 compliance with the requirements of this paragraph; and

37.4 (iii) are prima facie evidence of the facts stated in the affidavit.

37.5 (8) This paragraph applies to the estates of decedents dying on or after July 1, 1997.  
37.6 Clause (5) also applies with respect to all notices served on the commissioner of human  
37.7 services before July 1, 1997, under Laws 1996, chapter 451, article 2, section 55. All notices  
37.8 served on the commissioner of human services before July 1, 1997, pursuant to Laws 1996,  
37.9 chapter 451, article 2, section 55, shall be deemed to be legally sufficient for the purposes  
37.10 for which they were intended, notwithstanding any errors, omissions or other defects.

37.11 Sec. 35. Minnesota Statutes 2024, section 611.57, subdivision 2, is amended to read:

37.12 Subd. 2. **Membership.** (a) The Certification Advisory Committee consists of the  
37.13 following members:

37.14 (1) a mental health professional, as defined in section 245I.02, subdivision 27, with  
37.15 community behavioral health experience, appointed by the governor;

37.16 (2) a board-certified forensic psychiatrist with experience in competency evaluations,  
37.17 providing competency attainment services, or both, appointed by the governor;

37.18 (3) a board-certified forensic psychologist with experience in competency evaluations,  
37.19 providing competency attainment services, or both, appointed by the governor;

37.20 (4) the president of the Minnesota Corrections Association or a designee;

37.21 (5) the ~~direct care and treatment deputy commissioner~~ chief executive officer of direct  
37.22 care and treatment or a designee;

37.23 (6) the president of the Minnesota Association of County Social Service Administrators  
37.24 or a designee;

37.25 (7) the president of the Minnesota Association of Community Mental Health Providers  
37.26 or a designee;

37.27 (8) the president of the Minnesota Sheriffs' Association or a designee; and

37.28 (9) the executive director of the National Alliance on Mental Illness Minnesota or a  
37.29 designee.

38.1 (b) Members of the advisory committee serve without compensation and at the pleasure  
 38.2 of the appointing authority. Vacancies shall be filled by the appointing authority consistent  
 38.3 with the qualifications of the vacating member required by this subdivision.

38.4 Sec. 36. **REVISOR INSTRUCTION.**

38.5 The revisor of statutes shall renumber each provision of Minnesota Statutes listed in  
 38.6 column A to the number listed in column B.

38.7	<u>Column A</u>	<u>Column B</u>
38.8	<u>246B.01, subdivision 2b</u>	<u>246B.01, subdivision 2f</u>
38.9	<u>246B.01, subdivision 2c</u>	<u>246B.01, subdivision 2g</u>
38.10	<u>246B.01, subdivision 2d</u>	<u>246B.01, subdivision 2h</u>

38.11 Sec. 37. **REPEALER.**

38.12 Minnesota Statutes 2024, sections 246B.01, subdivision 2; 252.021, subdivision 2;  
 38.13 253.195, subdivision 2; 253B.02, subdivision 7b; 253D.02, subdivision 7a; 254B.01,  
 38.14 subdivision 15; 256.045, subdivision 1a; and 256G.02, subdivision 5a, are repealed.

38.15 Sec. 38. **EFFECTIVE DATE.**

38.16 This article is effective the day following final enactment."

38.17 Amend the title accordingly